PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10073029

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			10					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			(O minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			(minus 3 =		* 0			X42=	-	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					_		,	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	740
	C	LAIMS AS A	MENDED	MENDED - PART I							OTHER	THAN
(Column 1)			(Colur		mn 2)	(Column 3)	1 1	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	- 1.
AME	Independent	* (1997)	Minus	***				X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDEN'	T CLAIM		J	+140=		OR	+280=	
								TOTAL		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		JO	ADDIT. FEE	
Ė		(Column 1) CLAIMS		HIGH	IEST	(Column 3)	1		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=	-	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM BEST AVAILABLE COPY								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	,
(Column 1) (Column						(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	T CLAIM]					
• Make a returned in large than the order in column C units "O" in column C										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
	The "Highest Nur	nher Previously Pai	d For" (Total o	r indenend	lent) is the	highest number	er foi	and in the apr	ropriate bo	k in col	umn 1	